

STATE OF CONNECTICUT
DEPARTMENT OF CONSUMER PROTECTION
REAL ESTATE & PROFESSIONAL TRADES DIVISION
BOARD OF EXAMINERS FOR PROFESSIONAL ENGINEERS & LAND SURVEYORS
Telephone: (860) 713-6145



For Official Use Only

APPLICATION FOR LICENSE FOR PROFESSIONAL ENGINEER AND LAND SURVEYOR

INSTRUCTIONS:

- Your application must be typewritten or printed in ink, signed and notarized. This application **must be accompanied by a check or money order for the appropriate fee as noted in blocks below**, made payable to: "Treasurer, State of Connecticut".
→ Return your completed application and fee to : **Department of Consumer Protection, License Services, 165 Capitol Ave, Hartford, CT 06106.**
- Your "Verification of Education" form must be completed and sealed by the college/university which you graduated from and returned directly to the Department of Consumer Protection.
 - Remember that you must obtain a photograph in the approximate size of 2 1/2" x 2 1/2" which must be attached to the application in the space noted.

I hereby apply for: (Note: If you are applying in a Professional Engineer or Land Surveyor Class, do **not** check any Engineer-in-Training or Land Surveyor-in-Training Classes.)

Professional Engineer Application Fee: \$40.00 <input type="checkbox"/> Class 1 <input type="checkbox"/> Class 1A <input type="checkbox"/> Class 2 <input type="checkbox"/> Class 3 Application Fee: \$150.00 <input type="checkbox"/> Class 4 – Reciprocity	Land Surveyor Application Fee: \$40.00 <input type="checkbox"/> Class 5 <input type="checkbox"/> Class 6 <input type="checkbox"/> Class 7 <input type="checkbox"/> Class 8	Engineer-in-Training Application Fee: \$38.00 <input type="checkbox"/> Class 9 <input type="checkbox"/> Class 9S <input type="checkbox"/> Class 10 <input type="checkbox"/> Class 10S <input type="checkbox"/> Class 11	Land Surveyor-in-Training Application Fee: \$32.00 <input type="checkbox"/> Class 12 <input type="checkbox"/> Class 13 <input type="checkbox"/> Class 14 <input type="checkbox"/> Class 14A <input type="checkbox"/> Class 15	Combined Professional Engineer & Land Surveyor Application Fee: \$40.00 []
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Last Name			First Name		Middle Name
Residence Street Address			City	State	Zip Code
Telephone No. (Home)	Telephone No. (Work)	Date of Birth	Place of Birth		Social Security Number
Business (Work) Name		Business Street Address	City	State	Zip Code
Have you ever been refused by any State or Territory of the United States a license as a Professional Engineer, Land Surveyor, Engineer-in-Training or Land Surveyor-in-Training or have you ever held such license which has lapsed, suspended or revoked? YES [] NO [] If YES, please explain.					
Have you ever applied for license in Connecticut? YES [] NO []			Previous License Number		Dates Issued
Are you currently registered, or licensed, or certified in any State or Country? YES [] NO []					
OCCUPATION	CERTIFICATE #	STATE OR COUNTRY	HRS. OF WRITTEN EXAM	DATE ISSUED	
(1) As a Professional Engineer					
(2) As a Land Surveyor					
(3) As an Engineer-in-Training					
(4) As a Land Surveyor-in-Training					
Has the applicant ever been convicted of a felony crime? YES [] NO [] If yes - please attach a statement including the date(s) of the conviction(s), the court(s) where the case(s) were decided and a description of the circumstances involved.					

If filing for Reciprocity:

- ♦ If you hold a current National Council of Examiners for Engineering & Surveying (NCEES) "Record Council Book" you need only complete the front page of this application, indicate your NCEES Certificate Number and the date issued and complete the affidavit on the last page of the application and request NCEES to send a certified copy of your records directly to us. **If you do not hold a NCEES Council Book, you must complete the entire application and have all the proper documentation forwarded to us.** Only candidates who have passed the NCEES examination in another state are eligible for reciprocity under Class 4.

Deadlines for Applying

April Examination - The application deadline for the April examination is December 1st. All documents supporting your application must be received by December 31st in order to be considered for this examination. Applications that are not completed by this date will be scheduled for the next examination.

October Examination - The application deadline for the October examination is July 1st. All documents supporting your application must be received by July 31st in order to be considered for this examination. Applications that are not completed by this date will be scheduled for the next examination.

** Be sure to make a copy of your application package for your records **

RECORD of EXPERIENCE

Give the record of your active *qualifying professional experience in chronological order starting with the most recent. Summarize all your qualifying experience on this sheet. Do not submit additional sheets since the Board will only consider the experience summarized on this sheet. Account for any significant time when not engaged in engineering or land surveying professional activity. * *Qualifying experience is only that work experience related to Engineering or Land Surveying.*

Dates position held: From: (Month/year) - To: (Month/Year)	Starting with most recent position held, list in order : 1. (a) Title of position you held (b) Name, location & nature of business you were employed by and (c) Type of work you did including the degree of responsibility you were assigned.	List the amount of time in years & months during which you were in responsible charge in each position. State "None" if not in personal charge.
	2. Name and address of someone familiar with work listed, preferably the person to whom you reported or with whom associated and their PE or LS license number where applicable	
	1.	
	2.	
	1.	
	2.	
	1.	
	2.	
	1.	
	2.	
	1.	
	2.	
	1.	
	2.	
	1.	
	2	
		TOTAL TIME (Yrs & Mo)

RECORD of EXPERIENCE (Continued- if necessary)

Dates position held: From: (Month/year) - To: (Month/Year)	Starting with most recent position held, list in order : 1. (a) Title of position you held (b) Name, location & nature of business you were employed by and (c) Type of work you did including the degree of responsibility you were assigned.	List the amount of time in years & months during which you were in responsible charge in each position. State "None" if not in personal charge.
	2. Name and address of someone familiar with work listed, preferably the person to whom you reported or with whom associated and their PE or LS license number where applicable	
	1.	
	2.	
	1.	
	2.	
	1.	
	2.	
	1.	
	2.	
	1.	
	2.	
	1.	
	2.	
	1.	
	2	
		TOTAL TIME (Yrs & Mo)

EDUCATION

Nature and extent of your education in (A) High school or Preparatory School; (B) College or University; (C) Graduate School

NAME AND ADDRESS OF SCHOOL	YEARS ATTENDED FROM TO	DATE OF GRADUATION	COURSES COMPLETED AND DEGREE CONFERRED
A.			
B.			
C.			

SIGNATURES OF PERSONAL ENDORSERS

“In your opinion has the applicant used knowledge and experience in his or her own professional development so that he or she now qualifies in competency and judgment for consideration for licensure for which this application is being filed?”

Signatures required below are as follows: (DO NOT NAME MEMBERS OF THE BOARD);

Application for Professional Engineer: At least five (5) persons of whom at least four (4) shall be members of your profession and not related to you and at least one (1) who is listed in the Experience Record. At least three (3) must also be licensed Professional Engineers in the United States.

Application for Land Surveyor: At least five (5) persons of whom at least four (4) shall be members of your profession and not related to you and at least one (1) who is listed in the Experience Record. At least three (3) must be licensed Land Surveyors in the United States.

Application for Combined Professional Engineer & Land Surveyor: At least five (5) persons of whom at least four (4) shall be members of your profession and not related to you and at least one (1) attesting to your engineering experience and one (1) attesting to your surveying experience and listed in the Experience Record. At least two must be licensed Professional Engineers and at least two (2) must be licensed Land Surveyors in the United States.

Application for Engineer-in-Training: Class 10 - same as for Professional Engineer. Class 9, 9S, 10S or 11, list the names of the last three (3) persons familiar with your education and experience, signatures are not required for Class 9 or 11 or for senior students in Connecticut Schools in the last semester of an engineering curriculum.

Application for Land Surveyor-in-Training: Class 13 and 14 - same as for Land Surveyor Class 12 or 15, list the names of the last three (3) persons familiar with your education and experience, signatures are not required for Class 12 or 15 or for senior students in Connecticut Schools in the last semester of an engineering curriculum.

Printed or typed Name & Signature	Complete Address	State of licensure & License Number	Relationship to Applicant
(1) Name			
Signature			
(2) Name			
Signature			
(3) Name			
Signature			
(4) Name			
Signature			
(5) Name			
Signature			

PERSONAL AFFIDAVIT

The undersigned being duly sworn, upon his oath deposes and says that all information contained in this application to the best of his/her knowledge and belief are true and made in good faith.

Signature of Applicant	Signature - Notary Public
Date	Date

Insert passport type photo approx. 2-1/2" x 2-1/2" in size, on thin unglazed photo paper showing full front view in plain, light background taken within two years of date submitted.

Photograph must bear the signature of applicant and be taped securely on edges with clear cellulose tape.

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165 Capitol Avenue, Hartford, Connecticut 06106



VERIFICATION OF REGISTRATION

This form must be completed and returned to us by the official in the state in which you are registered.

Name of State completing this form _____

Connecticut requires dates and scores of exams for this individual. Please furnish.

Name of Applicant			
Street Address			
City	State	Zip Code	Social Security No.

I. THE ABOVE NAMED PERSON WAS REGISTERED AS:

	CERTIFICATE NO.	DATE ISSUED	VALID UNTIL	DATE APPLIED
<input type="checkbox"/> PROFESSIONAL ENGINEER				
<input type="checkbox"/> ENGINEER-IN-TRAINING				
<input type="checkbox"/> LAND SURVEYOR				
<input type="checkbox"/> LAND SURVEYOR-IN-TRAINING				

II. MINIMUM REQUIREMENTS WERE: (Above named person passed)

☐ **WRITTEN EXAMINATION:**

	PROFESSIONAL ENGINEER		LAND SURVEYOR			ENGINEER-IN-TRAINING	LAND SURVEYOR-IN-TRAINING
NCEES Exam	FE	PPE	FLS	PPLS	State	FE	FLS
Hours							
Date							
Score							
EIT/SIT ACCEPTED FROM:					EXAMINATION OPTION:		
<input type="checkbox"/> ORAL EXAMINATION			PE HRS			LS HRS	
<input type="checkbox"/> COMITY WITH:			(1)			(2)	
<input type="checkbox"/> EDUCATION AND EXPERIENCE: If less than eight (8) years experience including graduation from ABET engineering curriculum, please check here <input type="checkbox"/> and give details on the other side of this sheet.							
<input type="checkbox"/> OTHER: Please give full details on reverse side of this sheet.							

Certified By:

MANDATORY

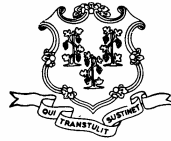
Please emboss Board Seal below.

Signature

Title

Date

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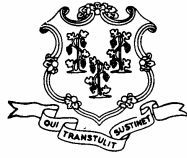
SUPPLEMENTAL BREAKDOWN OF SURVEYING EXPERIENCE

TIME PERIOD		PROPERTY LINE EXPERIENCE	TIME SPENT	
			AS SUBORDINATE	IN RESPONSIBLE CHARGE
FROM	TO	FIELD WORK	YR./MO.	YR./MO.
		ROD PERSON		
		INSTRUMENT PERSON		
		PARTY CHIEF		
		RECORDS RESEARCH		
FROM	TO	OFFICE WORK	YR./MO.	YR./MO.
		NOTE REDUCTION		
		PLOTTING & DRAFTING		
		PROPERTY LINE CALCULATIONS		
		SUBDIVISION LAYOUT		
		PREPARATION OF DESCRIPTION		
		SUPERVISION		
FROM	TO	OTHER THAN PROPERTY LINE EXPERIENCE	YR./MO.	YR./MO.
		CONTROL SURVEYS: (INCLUDING PHOTOGRAMMETRIC)		
		CONSTRUCTION LAYOUT		
		GEODETIC WORK		
		CONTROL SURVEYS		
		TOPOGRAPHIC SURVEYS		
		HIGHWAY & EASEMENT SURVEYS		
		OTHERS		
(APPLICATION IS INCOMPLETE IF TOTALS NOT SHOWN) TOTALS:				

Note: Land Surveyor and Land Surveyor-in-Training applicants must complete this form in addition to "Experience Record".
 CPR-46 New 3/93

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VERIFICATION OF EDUCATION

**CANDIDATES COMPLETE THIS SECTION BEFORE GIVING
THIS FORM TO YOUR REGISTRAR.**

**PLEASE PRINT OR TYPE ALL REQUESTED INFORMATION **

Name of Applicant			
Street Address			
City	State	Zip Code	Social Security No.

RECORD OF GRADUATION

Registrar's Office must provide the information requested below and return the completed form to the Department of Consumer Protection, License Services Division, 165 Capitol Ave, Hartford, CT 06106. **Transcripts are not required for Land Surveyor applicants.**

This is to certify that

_____ (Name of Graduate)

was graduated from

_____ (Name & address of College or University)

on (Date) _____ with the degree of

_____ (Type of Degree and Major)

This **degree is [] is not []** from a curriculum accredited by the Accreditation Board for Engineering and Technology (ABET).

MANDATORY

**Please emboss with
School Seal below:**

Certified By:
Registrar's Signature _____

Date _____